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Referral Guidelines

Routine exodontia in Warfarinised patients

Key Point

- For use at Wexham Park and Heatherwood Hospitals only

Version: 3
Date Issued: 18th November 2021
Review Date: August 2024
Key words: extraction, Warfarin

This is a controlled document. If you are using a printed copy, check it against the version on the intranet to ensure you are using the latest edition.

Abbreviations

Specific guidance was issued in 2009 related to the removal of teeth in dental practice for patients who are on warfarin. Patients should be managed according to these guidelines and not referred to hospital for “routine” extractions. The guidelines stipulate that extractions can safely be carried out in primary care in the following circumstances:

- Where the INR is less than 4.0.
- If the socket is packed and sutured.

Warfarin should not be stopped but the INR must be checked within 24 hours of the planned extraction (patients can usually co-ordinate this themselves with either their doctor or anti-coagulant clinic).

Patients should be referred if other coagulopathies co-exist, if there is a need for intravenous antibiotic cover or if the INR is maintained at over 4 (the latter will be recorded in the patient’s anticoagulant book).

Extractions should be timed appropriately and ideally should take place at the beginning of the week (such that delayed re-bleeding problems can be managed during the working week) and in the morning (such that immediate re-bleeding problems can be managed during the working day).

These guidelines are available at www.app.dundee.ac.uk/tuith/Static/info/warfarin.pdf and are summarised below.

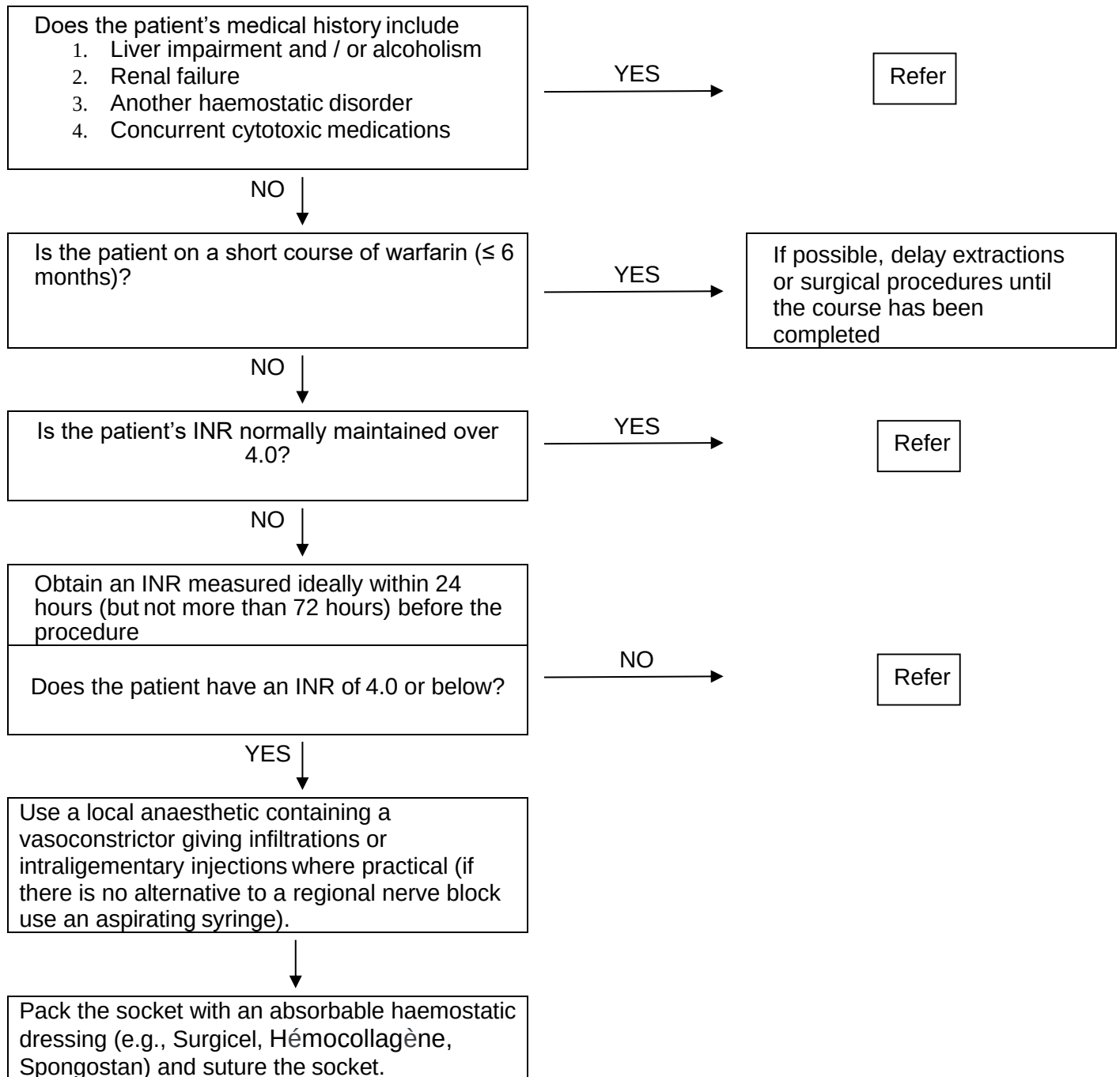
References

North West Medicines Information Centre (2009) *Surgical Management of the Primary Care Dental Patient on Warfarin*. Available at: www.app.dundee.ac.uk/tuith/Static/info/warfarin.pdf [Accessed 12/08/21]

Jacobs Weltman N et al *Management of Dental Extractions in Patients taking warfarin as anticoagulant treatment: a systematic review*. J Can Dent Assoc 2015 81 p.f20
Available at: <https://pubmed.ncbi.nlm.nih.gov/26679334/> [Accessed 12/08/21]

Scottish Dental Clinical Effectiveness Programme (2013) *Management of acute dental problems: guidance for healthcare professionals*. Available at: <https://www.sdcep.org.uk/wp-content/uploads/2013/03/SDCEP+MADP+Guidance+March+2013.pdf> [Accessed 12/08/21]

Management of routine exodontia in warfarinised patients undergoing surgical procedures in primary care



If the patient requires concurrent endocarditis prophylaxis, follow guidelines making note of potential drug interactions.

If the patient requires post-operative analgesia non-steroidal anti-inflammatory drugs should be avoided because of interactions.

Full version control record

Version:	3
Guidelines Lead(s):	Mr. Michael Amin, Consultant Oral & Maxillofacial Surgeon
Lead Director / Chief of Service:	Lt. Col. Nnaemeka Okpala, Chief of Service
Library check completed:	12 August 2021
Ratified at:	Oral Surgery Clinical Governance Group 19 October 2021
Date Issued:	November 2021
Review Date:	August 2024
Pharmaceutical dosing advice and formulary compliance checked by:	N/A
Key words:	extraction, Warfarin

This guideline has been registered with the trust. However, clinical guidelines are guidelines only. The interpretation and application of clinical guidelines will remain the responsibility of the individual clinician. If in doubt contact a senior colleague or expert. Caution is advised when using guidelines after the review date. This guideline is for use in Frimley Health Trust hospitals only. Any use outside this location will not be supported by the Trust and will be at the risk of the individual using it.

Version Control Sheet

Version	Date	Guideline Lead(s)	Status	Comment
1	27/8/2015	Mr M Amin	Final	
2	21/8/2018	Mr M Amin	Final	Approved for re-issue (unchanged)
3	19/10/2021	Mr M Amin	Final	Approved for re-issue (unchanged) Transferred to new template. References checked.

Related Documents

Document Type	Document Name